DOCUMENT RESUME

ED 289 580 PS 016 919

AUTHOR Szanton, Eleanor
TITLE Missing Links: The Relation of Research to Policy for Infants.
PUB DATE Apr 87
NOTE 11p.; Paper presented at the Annual Meeting of the Society for Research in Child Development (Baltimore, MD, April 23-26, 1987).
PUB TYPE Viewpoints (120) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Advocacy; *Child Caregivers; *Culture Lag; Early Childhood Education; Federal Legislation; *Individual Development; *Infants; Information Dissemination; Intervention; Parent Teacher Cooperation; Prevention; *Public Policy; Social Action

ABSTRACT

A sketch of some of the major advances in the field of infant development precedes a discussion which points out five policy implications of the research findings and explores the paradox that public policy lags far behind the current improved state of knowledge. Reasons for societal lack of attention to the needs of infants and for the worsening conditions to which infants are exposed are specified, as are encouraging signs of increased attention to problems facing infants. Listed are concrete examples of such changes, including conferences and publications providing examples of early prevention and intervention programs, statewide publicity efforts, and cover stories on infant day care in nationally distributed magazines. Concluding remarks focus on what researchers can do as advocates in order to move policymakers to take action, and to influence the impact of an amendment to the Education of the Handicapped Act (PL-99-457), and federal legislation, called SOBRA. This legislation allows states to offer Medicaid to families with children up to 2 years of age whose incomes are less than the national poverty level and who do not receive welfare services. (RH)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED289580

PS 016919

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
Eleanor S. Szanton
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

Missing Links: The Relation of Research to Policy for Infants

by Eleanor Szanton

(Presented at the Society for Research on Child Development Meeting April 1987)

I have come to think the title of this symposium and its abstract are misleading. They sound as though neat directional lines exist between research findings and public policy and that it's just a question of time for one to affect the other. Maybe I've gotten more sceptical since I wrote the abstract; because, despite all our new knowledge, in a number of ways the lives of infants and toddlers in this country are WORSE than before!

To mention what you know to be advances in our understanding of infant development over the past 20 years:

- o There has been a tremendous increase in our knowledge of infant capabilities, both sensory and cognitive.
- o Correspondingly, there's a much greater understanding of the vulnerabilities of infants.

We have come to understand much better:

- o individual differences in vulnerability and in integrative capacities and temperament;
- o the tremendous importance of state;
- o how the lines of development are interrelated - the ways in which physiological strengths and weaknesses become enmeshed with cognitive and/or social/emotional

attributes;

- o the development of attachment and the ways in which that can go wrong;
- o the microdynamics of interaction between infants and their primary caregivers;
- o the transactional nature of infants' relations with their environment - the effect of the infant on adult behavior;
- o the importance of responsive environments as related to the understanding of state and individual differences;

You've charted:

- o the development of small children's confidence that their actions will have an effect ;
- o the development of self-regulation and of comprehension that a present reverse is acceptable in a generally well meaning world;
- o the development of the ability to express thoughts and feelings symbolically;
- o You've used insights from transactional theory to map the multiplicity of risk factors and how much more poisonous they are to development as they interact with each other.
- o More recently you've examined the importance of wider ecological factors such as family stress and expressed or implicit attitudes toward it - how these affect the smallest member of the family.

That's only a sketch of some of the major developments in the field over the last couple of decades. It's been an exciting period for us all. Yet our society continues to arrange settings for care of our infants which are inconsistent with these insights.

Some of the most obvious policy implications from this research are:

1) that how we care for infants is important;
2) that care requires understanding of the needs and capacities of particular, individual children by adults who know them and are fond of them;
3) that in turn, those adults require a degree of physical and psychological support sufficient to allow them to devote their attention to this job at least a substantial part of time;
4) that health is an integral part of development; and
5) that possible barriers to development should be identified and dealt with as early as possible.

These are quite simple truths. Yet in 1987 our society seems very far from living by them. Families seem more stressed than before. Many new parents are practically children themselves. Fewer and fewer have the support of a second parent or of extended family members. Many very small children are in day care settings which are "not developmental." (Whether we argue that day care is or is not good for babies, we can all agree that

low quality day care is bad for infants and toddlers. And as Drs. Lally and Zigler have pointed out, we are in danger of having a first class and second class day care system in our country.) More and more children who will have developmental problems are being saved by neonatal intensive care units. More and more are born with drugs in their systems. (For example, Los Angeles County now estimates one infant in ten is born in a drugged condition.) Basic primary and preventive health care is more fragmented and sometimes less available than it used to be.

How can this paradox be? How can research have gone so far while policies which reflect its insights lag so far behind? Partly we're battling demographic trends. But other reasons for our society's lack of attention to its infants stems, I believe, from a number of sources:

- Our culture still bears the scars of bygone ages of enormously high infant mortality. For those thousands of years, adults could not afford to invest much emotion in newborn children. It is no coincidence that the 1911 edition of the Encyclopedia Brittanica's essay on "Infancy" wildly misestimates the developmental milestones while reporting infant mortality figures of 178 per thousand.
- I believe also there is a gut feeling that since we have each forgotten our own, infancy couldn't be important; whereas old age is a period of life we all

have yet to live through.

- o There is a natural and perhaps appropriate reticence about "interfering" with families at a time of life when many basic elements of family & cultural style are being set.
- o Babies don't disrupt school classrooms or mug their elders; their troubles don't force themselves on our attention.
- o Our belief we can find "a better time to intervene" encourages some of us to want to save our dollars until children are older and can be "fixed" more efficiently.

Yet there are certain encouraging signs.

1. It has seeped into the consciousness of at least the educated lay public that a lot is in fact going on in infancy.

   Many new parents are taking parenting much more seriously, and their elected officials are beginning to reflect this change.

2. There is broad public concern about infant day care- about its availability and quality.
3. There is a sense of urgency on the part of state governments about having an educated, competitive labor force to attract and keep industries - workers who have been "teachable" from their earliest years of school.
4. Similarly, there is concern among states about the high cost of problems which might have been avoided or

lessened through attention at an earlier age. The institutionalization or placement in special education of children with special needs fall in this category. So does the imprisonment of social deviants or the intensive care of low birthweight babies.

5. In the past fifteen years, there has been a sea change in attitude as to whether child abuse, like spouse abuse, is purely a private matter.

Concrete examples of these changes are all around us:

- The National Governor's Association in January 1986 sponsored an entire conference on "the First Sixty Months"; and it has produced an impressive companion publication with examples of early prevention and intervention programs.
- The State of Missouri features its "Parents as Teachers" program in ads to businessmen considering where to locate new facilities.
- The Wall St. Journal, TIME, Fortune Magazine and U.S. News and World Report have all recently had major or cover story articles on infant day care.

To sum up, then, so far:

1) Professionals doing academic and clinical research on infant devolpment now understand vastly more than was known even 20 years ago.

2) The public is begining to share that understanding; and

3) Policymakers are just beinning to respond to those changes.

4) At the same time, conditions for healthy development are worsening, for many children in our society. For some children they are poisonous.

5) That set of circumstances presents an opportunity to create stronger linkages between research and polciy.

Why have policymakers thus far been so slow to act? Because the consequences of inaction have not been spelled out for them with any specificity. They have not been shown the linkages between policy and outcomes for small children.

Why are policymakers so relatively ignorant? One reason is that with certain notable exceptions child development researchers have been sharing their insights only with each other! It is high time now for researchers to share them with policymakers and child advocates at a level of detail which is authoritative and persuasive -- to make "visible" the pain or the lost opportunities many infants and toddlers are experiencing.

An example of a compelling fact identified by research is that in contrast to other toddlers (even retarded children), toddlers who have been abused tend not to smile when they recognize in the mirror a dot of rouge on their noses. But no one has bothered to dramatize that fact to a lay audience.

Similarly, few of you have systemmatically reminded policymakers of the exponential cumulative effect of multiple risk factors on development.

A wise advocate once told me, "Democrats are moved by aggregate statistics; and Republicans are moved by individual cases." I happen to believe another missing link is the amount of interchange among researchers who collect aggregate statistics (such as cumulative risk factors) and those who do laboratory and clinical research (on red noses), not only to enhance each other's research but to pack this double wallop in speaking to policymakers.

There is a very great difference between saying about an issue: "That's too bad" and saying: "This is intolerable and must be stopped." To move policymakers from the first level to the second level, you must get involved with advocacy efforts on behalf of children in your state. Don't just read the Washington report of the SRCD newsletter, though that will help you.

Let me illustrate the kind of decisions which everyone who knows a lot about infants and toddlers should be trying to affect. There are actually three areas in which your states are probably going to be making some very important new decisions this year which will greatly affect many of the infants and toddlers who live around you.

First, if the national welfare reform legislation passes, your state will be setting the eligibility requirements for welfare mothers with respect to day care as they engage in job training. Will your state decide to force women with children over six months to accept whatever day care they can find, for which they will reimburse providers the equivalent of 71 cents an hour? Or will they make participation voluntary based on the adequacy of child care?

A second area in which your state will be making important decisions is in response to the new amendment to the Education of the Handicapped law (PL-99-457), which now includes services for handicapped and high risk infants and toddlers and their families. Your state will be deciding how to define the term "handicapped" and whether to include infants and toddlers who are merely "at risk of handicap" or "at risk of developmental delay without early intervention services." Will your state choose these broader definitions, or will they stick with narrow ones as they decide who should qualify for services.?

Finally there is legislation, called SOBRA, which for the first time allows states to offer Medicaid to families with children up to age two who are under the national poverty level but not on welfare. Will your state chose to take part? If so, will it set eligibility at the federal poverty level or at 1/3 or 1/2 or 3/4 of the poverty level? These choices will be made, and

not in Washington. They will be made where you live.

You as researchers have the kind of detailed knowledge, whether aggregate or clinical, to help make those decisions the right ones for infants and toddlers and their families in your state.

The last of the "missing linkages" I want to mention is this: If you get involved, you will find you have some tremendous natural allies. They are the parents who want to do well by their children (and of course this is the overwhelming majority of parents, whether or not they are able to). Service providers and administrators haven't listened to parents enough. They haven't made services easy to obtain. Yet in many cases, it is the parents who have been responsible for saving and expanding programs. Together we can make a very potent force as we "speak truth to power."